



COJET PROGRAM ACCREDITATION APPLICATION



PLEASE PRINT OR TYPE

Name:

Organization:

Address:

City/State/Zip:

Phone:

E-Mail:

Date of Program:

Program Title:

Upon accreditation of this program, the program sponsor is responsible for keeping the following documents on file for **five (5) years**.

- lesson plan/detailed agenda
- handouts
- a/v materials
- sign-in sheet
- compilation of evaluations

The following information must be submitted with this application.

- *Detailed program agenda*
- *Lesson plan (including topics of program and time devoted to each; activities to be utilized during program; adult learning techniques to be used)*
- *Handouts*
- *Any audio/visual materials to be used*
- *Learning objectives for the program*
- *Description of how learning will be evaluated*

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1. What is the purpose of the training (necessity)?
 2. Who is/are the intended audience(s)?
 3. List what participants should be able to do at the end of this training.

4. What will the total time be for this training minus breaks, meals, non - instructional activities?
 5. Describe the activity (ies) to be used to help participants understand and relate to the content.
 6. What instructional delivery methods will be used (please check)?
 - ☐ Lecture
 - ☐ Discussion
 - ☐ Role-plays
 - ☐ Small group work
 - ☐ Other:
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If applicant is **not** an Arizona State Court Employee, please complete the following:

1. List or attach historical information with respect to the education program to be offered including (a) title of program; (b) date(s) program offered in past; (c) site(s) of program offered in past; (d) organization(s)/participant(s) program has been offered to in past; (e) registration fee; (f) topics included in program and time devoted to each; and (g) faculty members, their experience and qualifications.
2. Enclose course materials as listed above from one of the programs enumerated in the preceding paragraph, held during the last calendar year, and attach summaries of course evaluations completed by participants for these programs.
3. Describe the experience and qualifications of the members of applicant's staff responsible for the planning and coordination of its programs.
4. State whether or not applicant is a non-profit organization or one engaged in the business of providing continuing education for profit.
5. State whether applicant has ever applied for, received, or been denied the equivalent of COJET Accredited Status in other state requiring mandatory continuing education.

6. If applicant is unable to provide any information requested above, please state the reason(s).
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APPLICANT REPRESENTS:

- (a) Each activity will have significant intellectual or practical content, and its primary objective will be to increase the participants' professional competence.
- (b) Each activity will be conducted by an individual or group qualified by practical or academic experience.
- (c) Each activity will be conducted substantially as planned, subject to emergency withdrawals and alterations.
- (d) Thorough, high quality, readable and carefully prepared written materials will be made available to participants at or before the time each activity is conducted unless clearly inappropriate for the particular course.
- (e) At the conclusion of each activity, each participant will be given the opportunity to complete an evaluation addressing the quality, effectiveness and usefulness of the particular activity.

APPLICANT AGREES:

- (a) To permit monitoring of activities by court sponsor, COJET member or staff of Education Services Division.
- (b) To maintain accurate records of attendance of each judge, probation officer and court personnel participant and to mail an accurate record of attendance of participants within 30 days of each program to the court sponsor.
- (c) To furnish the court sponsor with a copy of the course evaluations described in subparagraph (e) above, together with an abstract or summary of the results.
- (d) Applicant understands that failure to adhere to this agreement is grounds for revocation of COJET Accredited Status.

I certify the program adheres to accreditation standards as outlined in ACJA 1-302.E., the information contained here is accurate, and that I agree to the terms listed above:

Name:

Title:

Signature:

Date:

Return To: Arizona Supreme Court
Education Services Division
Attention: Renu Sapra
rsapra@courts.az.gov

COJET ACCREDITATION CERTIFICATION

APPROVED / DISAPPROVED

Total COJET Hours: _____

Curriculum, per ACJA 1-302:

☐ Ethics

Reason for disapproval:

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Signature of Education Services Staff:

Title:

Review Date:

Date Applicant Notified:



ARIZONA SUPREME COURT
Education Services Division

PROGRAM/LESSON PLAN

To navigate through this document, place your cursor in the first shaded box, enter information or click on check box, and tab to the next area.

Class Name:

Date of Program:

Time:

Length of Program:

Location:

Faculty Name

Court/Organization

Mailing Address

City **State** **Zip**

Phone

Fax

E-Mail

Please attach a current resume, vita or brief biographical outline

Additional Faculty Members

Learning Objectives

(Use action verbs to describe what participants should be able to do at conclusion of program)

Learning Evaluation

(Describe how participant learning will be evaluated – activities, methods, etc.)

Lesson Plan

*Please thoroughly complete this section, as it assists staff in assigning COJET hours to your session/program, and is used in the event you are unable to teach this class and a substitute is needed. A **thorough outline of the class is required** including subtopics discussed, activities to encourage and evaluate learning, etc. If additional space is needed, please attach a second page.*

TIME ALLOCATION (approximate)	PRESENTATION GUIDE (an outline of the program, including topics, subtopics, explanations, descriptions, activities, etc.)	NOTES TO TRAINER (reminders, references, audio/video equipment to be used, etc.)